2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002648

FILED Jan 09, 2004 Secretary of State

Entity Name: THE FLORIDA FOUNDATION FOR RESPONSIBLE ANGLING, INCORPORATED

Current Principal Place of Business:		New Principal Place of Business:	
GFA 300 GULF DANIA, FL	STREAM WAY . 33004	IGFA 300 GULFSTREAM WAY DANIA BEACH, FL 33004	
Current Mailing Address:		New Mailing Address:	
GFA 300 GULF DANIA, FL	STREAM WAY . 33004	IGFA 300 GULFSTREAM WAY DANIA BEACH, FL 33004	
El Number	: 59-3544654 FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:	
	ROBERT E STREAM WAY . 33004 US	KRAMER, ROBERT E 300 GULF STREAM WAY DANIA BEACH, FL 33004 US	
	named entity submits this statement for the e of Florida.	purpose of changing its registered office or registered agent, or both,	
SIGNATU	RE:	01/09/2004	
	Electronic Signature of Registered Ag	gent Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Γitle: √ame: √ddress:	D () Delete KRAMER, ROBERT 2590 EXECUTIVE CENTER CIRCLE E., STE 204	Title: D (X) Change () Addition Name: KRAMER, ROBERT	
	TALLAHASSEE, FL 32301	Address: 300 GULF STREAM WAY City-St-Zip: DANIA BEACH, FL 33004	
City-St-Zip: Fitle: Name: Address:	·		
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	TALLAHASSEE, FL 32301 D () Delete PUTNAM, TOM 2206 THOMAS DR.	City-St-Zip: DANIA BEACH, FL 33004 Title: () Change () Addition Name: Address:	
City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip:	TALLAHASSEE, FL 32301 D () Delete PUTNAM, TOM 2206 THOMAS DR. PANAMA CITY BEACH, FL 32408 D () Delete PEEBLES, DIANE P.O. BOX 12855	City-St-Zip: DANIA BEACH, FL 33004 Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Name: Name: Name: Name: Name:	TALLAHASSEE, FL 32301 D () Delete PUTNAM, TOM 2206 THOMAS DR. PANAMA CITY BEACH, FL 32408 D () Delete PEEBLES, DIANE P.O. BOX 12855 ST. PETERSBURG, FL 33733 D () Delete NICHOLS, SCOTT 250 SOUTH AUSTRALIAN AVENUE., STE 1102	City-St-Zip: DANIA BEACH, FL 33004 Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROB KRAMER D 01/09/2004